AGS Ref	Area of Assurance	Gap Identified	Agreed Action	Responsible Officer	Timescale
1.3 New	Effective procedures to identify, evaluate, communicate, implement, comply with and monitor legislative change exist and are used	Quarterly legislation tracker no longer produced by legal	Legal &Governance Services to explore a cost effective way of ensuring legislative changes are identified	Director of Legal & Governance Services	Nov 2011
1.7 c/f	Objectives are reflected in departmental plans and are clearly matched with associated budgets	No corporate requirement for services within Directorates to have Service Delivery Plans.	Assistant Chief Executive to produce paper for CSB consideration on how to close this gap. (as agreed by CGG 09/08/11)	Assistant Chief Executive	Nov 2011
3.4 c/f	There is a counter fraud and corruption policy in place which has been formally approved, regularly reviewed and widely communicated to all relevant staff.	Policy accessible on internet site but only via search facility on intranet (CAFT have no specific pages). No awareness sessions etc. are run.	Intranet to be enhanced to enable policy to be more accessible to staff. Corporate fraud awareness e-learning tool to be developed in-house.	Corporate Anti-fraud Service Manager (with help from Information Management) Corporate Anti-fraud Service Manager	Nov 2011 March 2012
3.7 New	Where a scheme of delegation has been drawn up, it has been formally approved and communicated to all relevant staff	Management Assurance Exercise identified directorate/service specific schemes of delegation covering HR / service specific responsibilities not consistently in place across the Council	Reminder on the requirement for a directorate/service specific scheme of delegation to be put in place to be sent to all Corporate Directors. Evidence of delegations in place to be provided to Internal Audit.	Assistant Chief Executive/Director of Finance Corporate Directors	September 2011 Dec 2011

AGS Ref	Area of Assurance	Gap Identified	Agreed Action	Responsible Officer	Timescale
3.34 c/f	There are up-to-date data security policies and guidance in place covering: • key business areas	There is no consistent approach for validating information from third parties as it is the responsibility of the contract 'owner'	Paper to CSB to be produced to address the GAP	Divisional Director - Partnership Development & Performance	November 2011
3.37 New	The council manages information risk effectively. Arrangements meet the requirements expected in government including having a capable Senior Information Risk Owner (SIRO). The council complies with the requirements set out in any relevant codes of connection for services it has in place, for example the Government Secure Intranet / Government Connect.	The Council has complied with the Governments Code of Connection and was formally certified on 1st Sept 09 and updated 29/07/11. However CAFT moved 01/08/11 to open plan office that does not, in the opinion of the CAFT Service Manager and the Information Management Service Manager comply with the relevant code of connection.	Plan to be developed to address how to meet requirements.	Corporate Anti-fraud Service Manager/ Service Manager - Property	November 2011

07/07/10

AGS Ref	Area of Assurance	Gap Identified	Agreed Action	Responsible Officer	Timescale
3.38 New	The council incorporates good practice standards and specified public sector policies on data and information security into its own policies and procedures. For example, ISO27001 and relevant Codes of Connection for the NHS Network (N3) and Government Secure Intranet and Government Connect.	In order to improve on data security, the Council has commissioned a gap analysis exercise (Dec 09) to help identify gaps in data security practices to enable us to imbed an ISMS to ISO27001 standards. Capita and the Council are now working together to implement some of the gaps to imbed an ISMS to ISO standard.	Action identified and agreed in ISMS/ISO action plan therefore no action required here.	N/A	N/A
10.5 New	Develop protocols to ensure that the leader and chief executive (or equivalent) negotiate their respective roles early in the relationship and that a shared understanding of roles and objectives is maintained	No protocol currently in place	Protocol to be developed and agreed	Director of Legal & Governance Services	November 2011

AGS Ref	Area of Assurance	Gap Identified	Agreed Action	Responsible Officer	Timescale
13.11 c/f	Joint workforce planning.	Although there is an integrated Children's Workforce Strategy and joint induction arrangements for those working with children across local partners this does not exist to any significant extent in other Directorates	This has been identified in the Strategy for People 2010-2012 as an action for 2011 therefore no further action is needed here.	N/A	N/A
13.19 New	Ensure that career structures are in place for members and officers to encourage participation and development	There is no career-planning programme in place at the officer level	This is reflected in the Strategy for People 2010-12 action plan therefore no further action needed here.	N/A	N/A

| OGF7 c/f | Making sure that an effective risk management system is in operation | No Business Continuity/IT Disaster recovery plan | Not in place for 2010/11. Will be complete by April 2012.

There are already some arrangements in place to meet this requirement (including an annual DR test) and a comprehensive range of improvements have been developed to ensure resilience and recovery capabilities as part of the new Capita IT contract.

One of the main projects to support this is the migration of the council's IT applications to the Capita West Malling site, which is due to commence in September on a phased programme which will be completed in April 2012.

There is a continuing risk until this project is complete although the wider business continuity plan takes this into account and the risk is no greater than it has been historically over a number of years. | Head of IT Client Team | April 2012 |
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| OGF8 c/f | Making sure that an effective risk management system is in operation | Health & Safety

Management Assurance Exercise identified that Health & Safety not working well across all areas of the Council. | A comprehensive review of H&S has been carried out and a new restructure and a two year improvement plan is commencing.

Progress against plan report to be provided to Internal Audit (at the request of Chief Executive) | Divisional Director Risk, Audit & Fraud | Dec 2011 |

AGS Ref	Area of Assurance	Gap Identified	Agreed Action	Responsible Officer	Timescale
3.42 c/f	The council engages with its staff and gains their commitment to, and ownership of, the council's approach to reducing its impact on the environment	Although a well publicised Energy Saving Campaign was run in 2008/09 it is recognised that a more pro-active engagement with staff is needed. Reduced staffing levels and a freeze on recruitment during 2010/11 have meant that it has not been possible to devise a programme. We anticipate recruiting and initiating a programme in the Autumn	To devise a pro-active engagement programme on the council's approach to reducing its impact on the environment.	Head of Climate Change	Nov 2011